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**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE****OFFICIAL**

<b>Applicant(s):</b> Yutaka Yokoyama	<b>Examiner:</b> Behrooz M. Senfi
<b>Serial No.:</b> 09/467,812	<b>Docket:</b> 13273
<b>Filed:</b> December 20, 1999	<b>Art Unit:</b> 2613
<b>For:</b> APPARATUS FOR AND METHOD OF VARIABLE BIT RATE VIDEO CODING	<b>Dated:</b> June 25, 2004
	<b>Confirmation No:</b> 2853

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

**REQUEST FOR RECONSIDERATION UNDER 37 C.F.R. § 1.112**

Sir:

This paper is responsive to the Office Action mailed 25 March 2004. Favorable reconsideration and withdrawal of all rejections is kindly requested in light of the following remarks.

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**CERTIFICATION OF FACSIMILE TRANSMISSION**

I hereby certify that this paper is being facsimile transmitted to the Patent and Trademark Office on the date shown below. (703) 872-9306

Dated: June 25, 2004

  
David J. Torrente

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**SCULLY, SCOTT, MURPHY  
& PRESSER**

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<b>To:</b>	Behrooz M. Senfi United States Patent & Trademark Office	<b>From:</b>	David J. Torrente
<b>Fax:</b>	1-703-872-9306	<b>Pages:</b>	8 (including fax cover sheet)
<b>Phone:</b>		<b>Date:</b>	June 25, 2004
<b>Re:</b>	Yutaka Yokoyama U.S. Patent Appln. No. 09/467,812 Our Docket: 13273	<b>CC:</b>	

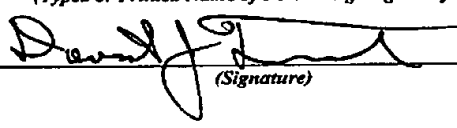
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Attached for submission to the U.S. Patent and Trademark Office are the following:


- **Certificate of Transmission by Facsimile**
- **Amendment Transmittal Letter**
- **Request for Reconsideration Under 37 C.F.R. § 1.112**

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<b>CERTIFICATE OF TRANSMISSION BY FACSIMILE (37 CFR 1.8)</b> Applicant(s): <b>Yutaka Yokoyama</b>			<b>Docket No.</b> <b>13273</b>
<b>Serial No.</b> <b>09/467,812</b>	<b>Filing Date</b> <b>December 20, 1999</b>	<b>Examiner</b> <b>Behrooz M. Senfi</b>	<b>Group Art Unit</b> <b>2613</b>
<b>Invention: APPARATUS FOR AND METHOD OF VARIABLE BIT RATE VIDEO CODING</b>			
<p>I hereby certify that this <u>Request for Reconsideration Under 37 C.F.R. 1.112</u> (Identify type of correspondence) is being facsimile transmitted to the United States Patent and Trademark Office (Fax. No. <u>703-872-9306</u>) on <u>June 25, 2004</u> (Date)</p> <p style="text-align: right;"><b>David J. Torrente</b> (Typed or Printed Name of Person Signing Certificate)  (Signature)</p> <p style="text-align: center;"><b>Note: Each paper must have its own certificate of mailing.</b></p>			

P18/REV01

<b>AMENDMENT TRANSMITTAL LETTER (Large Entity)</b>				<b>Docket No.</b> 13273	
Applicant(s): Yutaka Yokoyama					
<b>Serial No.</b> 09/467,812	<b>Filing Date</b> December 20, 1999	<b>Examiner</b> Behrooz M. Senti		<b>Group Art Unit</b> 2613	
Invention: APPARATUS FOR AND METHOD OF VARIABLE BIT RATE VIDEO CODING					
<u>TO THE COMMISSIONER FOR PATENTS:</u>					
Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below.					
<b>CLAIMS AS AMENDED</b>					
	<b>CLAIMS REMAINING AFTER AMENDMENT</b>	<b>HIGHEST # PREV. PAID FOR</b>	<b>NUMBER EXTRA CLAIMS PRESENT</b>	<b>RATE</b>	<b>ADDITIONAL FEE</b>
TOTAL CLAIMS	20 -	20 =	0 x	\$18.00	\$0.00
INDEP. CLAIMS	2 -	3 =	0 x	\$86.00	\$0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00
<b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT</b>					\$0.00
 <input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 19-1013/SSMP <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17.					
 _____ Signature			Dated: June 25, 2004		
David J. Torrente Registration No: 49,099 Scully, Scott, Murphy & Presser 400 Garden City Plaza Garden City, NY 11530 (516) 742-4343			<div style="border: 1px solid black; padding: 5px;"><p>I certify that this document and fee is being deposited on _____ with the U.S. Postal Service as first class mail under 37C.F.R. 1.8 and is addressed to the for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.</p><p>_____ Signature of Person Mailing Correspondence</p><p>_____ Typed or Printed Name of Person Mailing Correspondence</p></div>		
CC:					

P11LARGE/REV06